PTO/8B/08 (12-04) U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 812083 APPLICATION AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY (Column 2) ·· OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE (8) FEE (\$) RATE (\$) FEE (\$) (87 OFR 1.18(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(4), (1), or (m)) **EXAMINATION FEE** (17 OFR 1.16(0), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(I)) minus 20 = X INDEPENDENT CLAIMS OR (87 CFR 1.16(10) = 8 aurim = If the specification and drawings exceed 100 X **APPLICATION SIZE** streets of paper, the application size fee due FEE is \$250 (\$125 for small entity) for each (57 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(II)) If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) OTHER THAN (Column 2) (Column 3) OR SMALL ENTITY CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADDI-TIONAL FEE (\$) AFTER RATE (\$) PREVIOUSLY EXTRA ADDI-AMENDMENT MENDMENT PAID FOR Total 2 FEE (\$) Minus (DI CFR 1.16(I)) × 25 = 20 50°° OR Independent (27 OFR 1.16(h)) Minus ×100 = × 2000 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) OR TOTAL TOTAL ADD'L FEE OR: ADD'L FEE (Column 1) (Column 2) (Column 8) CLAIMS HIGHEST REMAINING NUMBER **PRESENT** RATE (\$) ADDI-TIONAL RATE (\$) AFTER **PREVIOUSLY** EXTRA ADDI-TIONAL MENDMENT **PAID FOR** FEE (\$) Total (F7 OFR 1.16()) FEE (\$) Minus IENDM x . OR Independent (37 OFR 1.1601) Minus Application Size Fee (37 CFR 1.16(s)) OR x FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.160)) OR TOTAL TOTAL

\* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.

\*\* If the Highest Number Previously Paid For' IN THIS SPACE is tess than 20, enter "20".

\*\*The Highest Number Previously Paid For' IN THIS SPACE is tess than 3, enter "3".

The Highest Number Previously Paid For' IT otal or Independent is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the unduring gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

ADD'L FEE

OR

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